

**MONTGOMERY TOWNSHIP HEALTH DEPARTMENT
ONSITE WASTEWATER DISPOSAL MANAGEMENT DISTRICT
SEPTIC TANK MANAGEMENT LICENSE RENEWAL APPLICATION**

I hereby apply for a license to operate, use and maintain an onsite subsurface wastewater disposal system to serve the below designated property located within Montgomery Township. I certify that to the best of my knowledge, the information being furnished is true and correct.

Date of Application: _____ **Signature:** _____

<i>Health Department Use Only</i>		
Invoice Date: _____	Amount Due: <u>\$60.00</u> if paid by due date.	STM License

****Please attach a check in the amount of \$60.00 made payable to "Montgomery Township." Please mail all renewal paperwork to the Health Department at 2261 Route 206, Belle Mead, NJ 08502.****

Name of Property Owner: _____

Address of System Location: _____

Post Office & Zip Code : _____

** If your mailing address is different from the property address please include that address on a separate sheet of paper.*

Phone No. Home: _____ **Block No.:** _____ **Lot No.:** _____
Work: _____

1. The septic system serves (Please check all applicable):

- Single Family Residence ⇨ No. of Bedrooms: _____ ⇨ No. of Employees (if any): _____
- Commercial Use ⇨ Type of Business: _____ ⇨ No. of Employees: _____
- Other ⇨ Specify Type: _____ ⇨ No. of Employees: _____

2. Year the System was installed: _____

3. Has the system *ever* been repaired or altered? No Yes Year _____

4. A prerequisite for the renewal of your license is to have had the septic tank pumped OR inspected within the past three years.

- a. If your septic tank is equipped with an effluent filter, the filter must be cleaned at the time of pumping.**
- b. Attach a copy of the pumping/inspection receipt showing gallons pumped and the date of pumping.**

5. IF your system has not been pumped during the past three years, please have it pumped now, and attach a copy of that pumping receipt.

6. Are you now experiencing any of the following problems with your system? (Please check all that apply)

- Sewage backs up into home. Septic odors are present
- There is surface ponding and/or septic water breakout over the septic field.
- Other Malfunction; Specify: _____
- My system operates trouble-free

Failure to renew the septic management license will result in fines and penalties as prescribed by Board of Health Codes.